

CIG WAGE RATE REQUEST

TO : _____

FROM : _____ DATE : _____

PROJECT NAME : _____ CIG# : _____

PROJECT LOCATION : _____ CITY/CO : _____

Estimated Advertising Date : _____ Bid Opening Date : _____

Provide a specific description of ALL CIG-funded construction activities to be bid under this specific construction contract.

Activity Type	Quantity	Estimated Cost
Sewer:		
Water:		
Laterals:		
Streets:		
Housing Rehab 8+ Units:		
Other:		
Total		

Mail Wage Decision Package to the Following Address:

(Name) _____, (Firm) _____

(Address) _____